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PTO/SB/01 (12-97)  
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**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

☐ Declaration Submitted with Initial Filing **OR** ☒ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

**Attorney Docket Number** I-2-0482.1US

**First Named Inventor** Li et al.

**COMPLETE IF KNOWN**

**Application Number** 10/750,203

**Filing Date** December 31, 2003

**Group Art Unit** Not Yet Known

**Examiner Name** Not Yet Known

**As a below named inventor, I hereby declare that:**

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

the specification of which (Title of the Invention)

☐ is attached hereto  
OR

☒ was filed on (MM/DD/YYYY) 12/31/2003 as United States Application Number or PCT International

Application Number 10/750,203 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/501,302	09/09/2003	

[Page 1 of 3]

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**DECLARATION — Utility or Design Patent Application**

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U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

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As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☒ Customer Number **24374**

OR

☐ Registered practitioner(s) name/registration number listed below

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Name	Registration Number	Name	Registration Number
Namely, the Attorneys of Volpe and Koenig, P.C.			

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☒ Customer Number **24374** OR ☐ Correspondence address below

Name	VOLPE AND KOENIG, P.C. DEPT ICC				
Address					
Address					
City		State		ZIP	
Country		Telephone		Fax	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])	Family Name or Surname
Bin	Li

Inventor's Signature	<i>B Li</i>			Date	Mar. 19, 2004
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Post Office Address	500 Peconic Street, Apt. 25A				
Post Office Address					
City	Ronkonkom	State	NY	ZIP	11779
Country	USA				

☒ Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

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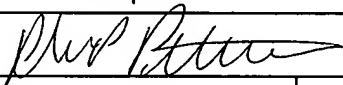
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**DECLARATION****ADDITIONAL INVENTOR(S)****Supplemental Sheet**Page 1 of 1

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
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Inventor's Signature			Date
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Country	USA	Citizenship	USA
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Mailing Address			
City	Great Neck	State	NY
ZIP	11021	Country	USA
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
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Philip J.		Pietraski	
Inventor's Signature 			Date 03/19/2004
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Country	USA	Citizenship	USA
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Mailing Address			
City	Huntington Station	State	NY
ZIP	11746	Country	USA
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature			Date
Residence: City		State	
Country		Citizenship	
Mailing Address			
Mailing Address			
City		State	
ZIP		Country	



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As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☒ Customer Number

24374

OR

☐ Registered practitioner(s) name/registration number listed below

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Name	Registration Number	Name	Registration Number
Namely, the Attorneys of Volpe and Koenig, P.C.			

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

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or Bar Code Label

24374

OR ☐ Correspondence address below

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Address					
City		State		ZIP	
Country		Telephone		Fax	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))		Family Name or Surname	
Bin		Li	
Inventor's Signature			Date
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	Country	USA	Citizenship
Post Office Address	500 Peconic Street, Apt. 25A		
Post Office Address			
City	Ronkonkom	State	NY
	ZIP	11779	Country
		USA	

☒ Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

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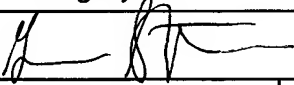
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Given Name (first and middle [if any])		Family Name or Surname	
Gregory S.		Sternberg	
Inventor's Signature 		Date 04/14/2004	
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Mailing Address			
City	Great Neck	State	NY
ZIP	11021	Country	USA
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Philip J.		Pietraski	
Inventor's Signature		Date	
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Country	USA	Citizenship	USA
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Mailing Address			
City	Huntington Station	State	NY
ZIP	11746	Country	USA
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	
Country		Citizenship	
Mailing Address			
Mailing Address			
City		State	
ZIP		Country	